

FEC
FORM 3

REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 OCT 13 PM 1:17
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DAN PHILLIP FOR CONGRESS

ADDRESS (number and street)

1310 CLAREMONT AVE

☒ Check if different
than previously
reported. (ACC)

ASHLAND

OH

44805

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C00558387

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

STATE ▼ DISTRICT

OH

107

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M

D D

Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M

D D

Y Y Y Y

in the
State of

5. Covering Period

M M

D D

2016

through

M M

D D

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

TERRY E. RUMKER

Signature of Treasurer

Terry E. Rumker

Date

M M

D D

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only

FEC FORM 3
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Page 2

Write or Type Committee Name

DAN PHILLIP FOR CONGRESS

Report Covering the Period:

From:

09/01/2016

To:

09/30/2016

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e))

5869.00

10590.64

(b) Total Contribution Refunds
(from Line 20(d))

—

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

5869.00

10590.64

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

1944.78

4150.09

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

1944.78

4150.09

8. Cash on Hand at Close of
Reporting Period (from Line 27)

6440.55

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Page 3

Write or Type Committee Name

DAN PHILLIP For CONGRESS

Report Covering the Period:

From:

MM ' DD ' YYYY
07 ' 01 ' 2016

To:

MM ' DD ' YYYY
09 ' 30 ' 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

5410.00

9660.00

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

5410.00

9660.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

459.00

930.64

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

5869.00

10590.64

12. TRANSFERS FROM OTHER

AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

5869.00

10590.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1,944.78	4,150.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1,944.78	4,150.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2516.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5869.00
25. SUBTOTAL (add Line 23 and Line 24).....	8385.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1,944.78
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6440.55

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 8	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial) <u>ATCHISCOM, LONNIE</u>		Date of Receipt <u>05</u> / <u>28</u> / <u>2016</u>
Mailing Address <u>944 EDISON ST.</u>		Amount of Each Receipt this Period <u>50.00</u>
City <u>ASHLAND</u>	State <u>OH</u> Zip Code <u>44805</u>	
FEC ID number of contributing federal political committee. <u>C</u>		<input type="checkbox"/> Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) <u>PHILLIP, DAN</u>		Date of Receipt <u>05</u> / <u>25</u> / <u>2016</u>
Mailing Address <u>206 HIGHLAND BULD.</u>		Amount of Each Receipt this Period <u>34.00</u>
City <u>ASHLAND</u>	State <u>OH</u> Zip Code <u>44805</u>	
FEC ID number of contributing federal political committee. <u>C</u>		<input type="checkbox"/> Memo Item <u>11d</u>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) <u>CHORPENING, BLAKE</u>		Date of Receipt <u>07</u> / <u>06</u> / <u>2016</u>
Mailing Address <u>1324 EASTBROOK DRIVE</u>		Amount of Each Receipt this Period <u>125.00</u>
City <u>ASHLAND</u>	State <u>OH</u> Zip Code <u>44805</u>	
FEC ID number of contributing federal political committee. <u>C</u>		<input type="checkbox"/> Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....	▶	
TOTAL This Period (last page this line number only).....	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 8

☐ 11a ☐ 11b ☐ 11c ☒ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. KIRTLAND, JIM

Mailing Address

505 KATHERINE AVE.

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

07 / 28 / 2016

Amount of Each Receipt this Period

100.00

Memo Item

11A

Full Name (Last, First, Middle Initial)

MOWRY, SCOTT

Mailing Address

1271 HILLCREST DR.

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

07 / 24 / 2016

Amount of Each Receipt this Period

75.00

Memo Item

11A

Full Name (Last, First, Middle Initial)

C. PHILLIP, DAN

Mailing Address

206 HIGHLAND BLVD.

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

07 / 18 / 2016

Amount of Each Receipt this Period

425.00

Memo Item

11D

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 8	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) DAN PHILLIP FOR CONGRESS

Full Name (Last, First, Middle Initial) <u>PROVINCE, RACHEL</u>		Date of Receipt M M ' D D ' Y Y Y Y <u>05 06 2016</u>	
Mailing Address <u>POTTERS LANE</u>			
City <u>CHURKSVILL</u>	State <u>IN</u>	Zip Code <u>47129</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>150.00</u>	
Name of Employer		Memo Item	
Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) <u>SCHOCH, JAMES</u>		Date of Receipt M M ' D D ' Y Y Y Y <u>07 08 2016</u>	
Mailing Address <u>8501 RANSOM DR.</u>			
City <u>MT. VERNON</u>	State <u>OH</u>	Zip Code <u>43050</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>50.00</u>	
Name of Employer		Memo Item	
Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) <u>USHER, ROD</u>		Date of Receipt M M ' D D ' Y Y Y Y <u>07 01 2016</u>	
Mailing Address <u>11432 E. DESERT VISTA DR.</u>			
City <u>SCOTTSDALE</u>	State <u>AZ</u>	Zip Code <u>85255</u>	
FEC ID number of contributing federal political committee. <u>C</u>		Amount of Each Receipt this Period <u>350.00</u>	
Name of Employer		Memo Item	
Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....	▶
TOTAL This Period (last page this line number only).....	▶

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 4 OF 8

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

DAN PHILLIP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USHER, JOHN

Mailing Address

222 W. 2ND ST.

City

PERRYSBURG

State

OH

Zip Code

FEC ID number of contributing federal political committee.

C

Date of Receipt

07/17/2016

Amount of Each Receipt this Period

100.00

Memo Item

Name of Employer

Occupation

Receipt For:

Election Cycle-to-Date

☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. USHER, LAURA

Mailing Address

1145 SMITH RD

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing federal political committee.

C

Date of Receipt

07/20/2016

Amount of Each Receipt this Period

20.00

Memo Item

Name of Employer

Occupation

Receipt For:

Election Cycle-to-Date

☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. WEIRICH, MIKE

Mailing Address

1332 BLOSSOM LANE

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing federal political committee.

C

Date of Receipt

07/28/2016

Amount of Each Receipt this Period

100.00

Memo Item

Name of Employer

Occupation

Receipt For:

Election Cycle-to-Date

☐ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)PAGE **5** OF **8**☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

DAN PHILLIP FOR CONGRESS

Full Name (Last, First, Middle Initial)

USHER, BRUCE

A Mailing Address

1276 TWP. RD. 1253

City

ASHLAND

State

OH

Zip Code

44805FEC ID number of contributing
federal political committee.**C**

Date of Receipt

08 / 01 / 2016

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

SHULTZ, JENNIFER

B Mailing Address

1311 COUNTY RD 1153

City

ASHLAND

State

OH

Zip Code

44805FEC ID number of contributing
federal political committee.**C**

Date of Receipt

08 / 01 / 2016

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

REINEKE, LEE

C Mailing Address

PO-Box 1199

City

NANKIN

State

OH

Zip Code

44848FEC ID number of contributing
federal political committee.**C**

Date of Receipt

08 / 15 / 2016

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶**TOTAL** This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 8

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. CHORPENING, KATHLEEN

Mailing Address

1025 HALE DR.

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

08/29/2016

Amount of Each Receipt this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CIANCIOLO, CHUCK

Mailing Address

843 ST. RT 511

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

08/29/2016

Amount of Each Receipt this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MONRY, CAROL

Mailing Address

1714 KINGWOOD CT.

City

ASHLAND

State

OH

Zip Code

44805

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

08/26/2016

Amount of Each Receipt this Period

75.00

Memo Item

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 8	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial) A. QUINN, SUSAN		Date of Receipt 09/12/2016
Mailing Address 1398 U.S. HWY 42		Amount of Each Receipt this Period 100.00
City ASHLAND	State OH Zip Code 44805	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) B. BROWNFIELD, JOSEPH		Date of Receipt 09/12/2016
Mailing Address N/A		Amount of Each Receipt this Period 15.00
City N/A	State Zip Code	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) C. LAURENTZ, Jim		Date of Receipt 09/20/2016
Mailing Address P.O. Box 756		Amount of Each Receipt this Period 500.00
City MANSFIELD	State OH Zip Code 44901	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional) _____

TOTAL This Period (last page this line number only) _____

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 8	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)	DAN PHILLIP For CONGRESS
-----------------------------	--------------------------

Full Name (Last, First, Middle Initial) A. McFARLIN, JEFF		Date of Receipt MM/DD/YYYY 09/22/2016
Mailing Address 1566 BANEY RD. UNIT B		Amount of Each Receipt this Period 100.00
City ASHLAND	State OH Zip Code 44805	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) B. COFFEY, BRENT		Date of Receipt MM/DD/YYYY 09/22/2016
Mailing Address 507 EVERGREEN ST.		Amount of Each Receipt this Period 500.00
City ASHLAND	State OH Zip Code 44805	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

Full Name (Last, First, Middle Initial) C. PHILLIP, MIKE		Date of Receipt MM/DD/YYYY 09/27/2016
Mailing Address 14172 N. BRIDAL PATH CT.		Amount of Each Receipt this Period 100.00
City MEQUON	State WI Zip Code 53097	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE / OF //

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. *DAN PHILLIP*

Mailing Address

206 HIGHLAND BULD.

City *ASHLAND*

State *OH*

Zip Code *44805*

Purpose of Disbursement

03

Date of Disbursement

07 / 05 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

940

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *OH*

District: *7*

B. Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City *ASHLAND*

State *OH*

Zip Code *44805*

Purpose of Disbursement

07

Date of Disbursement

07 / 06 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

11.61

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *OH*

District: *7*

C. Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City *ASHLAND*

State *OH*

Zip Code *44805*

Purpose of Disbursement

02

Date of Disbursement

05 / 06 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

1200

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: *OH*

District: *7*

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD.

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

03

Date of Disbursement

07 / 08 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

1.15

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 7

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

07

Date of Disbursement

07 / 30 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

1.60

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 7

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

07

Date of Disbursement

07 / 30 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

2.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 7

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

07 22 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

378.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

07 29 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

300.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08 16 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

174.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD.

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

08' 04' 2016

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

07
Category/
Type

Amount of Each Disbursement this Period

3546

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

08' 04' 2016

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

06
Category/
Type

Amount of Each Disbursement this Period

12.84

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

08' 30' 2016

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

07
Category/
Type

Amount of Each Disbursement this Period

355.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A.

DAN PHILLIP

Date of Disbursement

08' 03' 2016

Mailing Address

206 HIGHLAND BULD.

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

02
Category/
Type

Amount of Each Disbursement this Period

10.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

B.

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Date of Disbursement

08' 09' 2016

Mailing Address

206 HIGHLAND BULD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

03
Category/
Type

Amount of Each Disbursement this Period

.68

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

C.

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Date of Disbursement

08' 11' 2016

Mailing Address

206 HIGHLAND BULD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

FEC Identification Number

C00558387

Candidate Name

DAN PHILLIP

02
Category/
Type

Amount of Each Disbursement this Period

25.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Memo Item

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

<p>A. Full Name (Last, First, Middle Initial) <i>DAN PHILLIP</i></p> <p>Mailing Address <i>206 HIGHLAND BLVD.</i></p> <p>City <i>ASHLAND</i> State <i>OH</i> Zip Code <i>44805</i></p> <p>Purpose of Disbursement</p> <p>Candidate Name <i>DAN PHILLIP</i> Category/Type <i>07</i></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <i>OH</i> District: <i>07</i></p>					<p>Date of Disbursement</p> <p><i>08' 04' 20' 16</i></p> <p>FEC Identification Number</p> <p><i>C00558387</i></p> <p>Amount of Each Disbursement this Period</p> <p><i>15.46</i></p> <p>Memo Item</p>	
<p>B. Full Name (Last, First, Middle Initial) <i>DAN PHILLIP</i></p> <p>Mailing Address <i>206 HIGHLAND BLVD</i></p> <p>City <i>ASHLAND</i> State <i>OH</i> Zip Code <i>44805</i></p> <p>Purpose of Disbursement</p> <p>Candidate Name <i>DAN PHILLIP</i> Category/Type <i>02</i></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <i>OH</i> District: <i>07</i></p>					<p>Date of Disbursement</p> <p><i>08' 03' 20' 16</i></p> <p>FEC Identification Number</p> <p><i>C00558387</i></p> <p>Amount of Each Disbursement this Period</p> <p><i>11.06</i></p> <p>Memo Item</p>	
<p>C. Full Name (Last, First, Middle Initial) <i>DAN PHILLIP</i></p> <p>Mailing Address <i>206 HIGHLAND BLVD</i></p> <p>City <i>ASHLAND</i> State <i>OH</i> Zip Code <i>44805</i></p> <p>Purpose of Disbursement</p> <p>Candidate Name <i>DAN PHILLIP</i> Category/Type <i>02</i></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: <i>OH</i> District: <i>07</i></p>					<p>Date of Disbursement</p> <p><i>08' 01' 20' 16</i></p> <p>FEC Identification Number</p> <p><i>C00558387</i></p> <p>Amount of Each Disbursement this Period</p> <p><i>10.00</i></p> <p>Memo Item</p>	
<p>SUBTOTAL of Disbursements This Page (optional)</p>						
<p>TOTAL This Period (last page this line number only)</p>						

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD.

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

02

Date of Disbursement

08' 08' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

10.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

B. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

02

Date of Disbursement

08' 11' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

25.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

C. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

06

Date of Disbursement

08' 31' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

198.58

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: OH

District: 07

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD.

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

06

Date of Disbursement

08' 26' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

219.35

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

B. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

02

Date of Disbursement

08' 29' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

15.00

Memo Item

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

C. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

02

Date of Disbursement

08' 31' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

12.00

Memo Item

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD.

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

03

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 07

Date of Disbursement

09 / 09 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

24.88

Memo Item

Full Name (Last, First, Middle Initial)

B.1 DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

02

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 07

Date of Disbursement

08 / 15 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

10.03

Memo Item

Full Name (Last, First, Middle Initial)

C. DAN PHILLIP

Mailing Address

206 HIGHLAND BULD

City ASHLAND

State OH

Zip Code 44805

Purpose of Disbursement

02

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 07

Date of Disbursement

08 / 18 / 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

12.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD.

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08' 25' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

12.00

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

02

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08' 30' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

19.34

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

07

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08' 29' 2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

11.94

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

07

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

DAN PHILLIP For CONGRESS

Full Name (Last, First, Middle Initial)

A. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD.

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08/31/2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

9.40

Memo Item

2
1
0
6
1
0
1
6
Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 07

Full Name (Last, First, Middle Initial)

B. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08/31/2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

Memo Item

1
0
0
1
0
0
1
0
Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. DAN PHILLIP

Mailing Address

206 HIGHLAND BLVD

City

ASHLAND

State

OH

Zip Code

44805

Purpose of Disbursement

Date of Disbursement

08/31/2016

FEC Identification Number

C00558387

Amount of Each Disbursement this Period

Memo Item

Candidate Name

DAN PHILLIP

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	13a
	<input type="checkbox"/>	13b

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)	<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address		
City	State	ZIP Code
		<input type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y Y	M M / D D / Y Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3)

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">C</div>	
LENDING INSTITUTION (LENDER) Full Name		Amount of Loan <div style="border: 1px solid black; width: 150px; height: 20px;"></div>		Interest Rate (APR) <div style="border: 1px solid black; width: 100px; height: 20px;"></div> %	
Mailing Address		Date Incurred or Established <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>		Date Due <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>	
City	State	Zip Code			
A. Has loan been restructured? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>					
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; width: 150px; height: 20px;"></div> Total Outstanding Balance: <div style="border: 1px solid black; width: 150px; height: 20px;"></div>					
C. Are other parties secondarily liable for the debt incurred? <input type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Schedule C.)					
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____					
				What is the value of this collateral? <div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
				Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____					
				What is the estimated value? <div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).					
Date account established: <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>				Location of account: Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.					
G. COMMITTEE TREASURER Typed Name Signature				DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>	
H. Attach a signed copy of the loan agreement.					
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.					
AUTHORIZED REPRESENTATIVE Typed Name Signature				DATE <div style="display: flex; justify-content: space-between;"><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">M M</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">D D</div><div style="border: 1px solid black; width: 30px; height: 20px; text-align: center;">Y Y Y Y</div></div>	
				Title	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE	OF
	FOR LINE NUMBER: (check only one)	
	<input type="checkbox"/>	9
	<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)	
-----------------------------	--

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<div></div>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<div></div>	<div></div>	<div></div>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<div></div>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<div></div>	<div></div>	<div></div>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<div></div>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<div></div>	<div></div>	<div></div>

1) SUBTOTALS This Period This Page (optional)	<div></div>
2) TOTALS This Period (last page this line number only)	<div></div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<div></div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<div></div>

FEC FORM 3Z (File with Form 3)
CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS
(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)		Report Covering Period:		To:		
		From:				
		<div>M M / D D / Y Y Y Y</div>		<div>M M / D D / Y Y Y Y</div>		
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A						
B	Column Total Last Page Only.....					
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B						
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10/11/16
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(3/2015)



10/13/16
DATE PREPARED

2016-10-13 10:00:10